08-16-01

ADDRESS TO:

Approved for use through 10/31/2002 OMB 0681-0032
Patient and Trademark Office US DEPARTMENT OF COMMERCE

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

ATION
Attorney Docket No.

Title

Adapter Plates For Cleaning Implemen Berger (1995)

Title

Title

ET604021118US

Commissioner for Patents

Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission

Box Patent Application

(if applicable, all necessary)

ii. Il Paper

Washington, D.C. 20231
7. II CD-ROM or CD-R in duplicate, large table or

a. [] Computer Readable Form (CRF)

b. Specification Sequence Listing on:

| | Express Mail Label No |
|----------------------|-----------------------|
| APPLICATION ELEMENTS | |

See MPEP Chapter 600 concerning utility patent application contents.

1. [X] Fee Transmittal Form (e.g., PTO/SB/17)

(Submit an original, and a duplicate for fee processing)
2. [] Applicant claims small entity status

(see 37 CFR §1.27)

3. [X] Specification Total Pages [36]

- (preferred arrangement set forth below)

 Descriptive Title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R&D
 - Reference to sequence listing, a table, or a computer
 - program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- 4. [X] Drawing(s) (35 USC §113) Total Sheets [17]
- Oath or Declaration

Total pages [2]

- a. [X] Newly executed (original or copy)
- b. [] Copy from a prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 18 complete
 - [] <u>DELETION OF INVENTORS</u>
 Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §\$1.63(d)(2) and 1.33(b).

c. [] Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

i. [] CD-ROM or CD-R (2 copies); or

- [] Assignment Papers (cover sheet & document(s))
 [] 37 CFR 3.73(b) Statement [] Power of Attorney (when there is an assignee)
- 11. [] English Translation Document (if applicable)
- 12. [] Information Disclosure [] Copies of IDS Statement (IDS)/PTO-1449 Citations
- 13. [] Preliminary Amendment
- 14. [X] Return Receipt Postcard (MPEP 503)
 (Should be specifically itemized)
- 15. [] Certified Copy of Priority Document(s)
- (if toreign priority is claimed)

 16. [] Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form
- PTO/SB/35 or its equivalent.

 17. | Other:

| 6 | п | Application | Data Sheet. | See 37 CEF | 81.76 |
|---|---|-------------|-------------|------------|-------|
| | | | | | |

| 18. If a CONTINUING APPLICATION, check appropriate box and supply the requ | uisite information below and in a preliminary |
|--|---|
| amendment, or in an Application Data Sheet under 37 CFR §1.76: | |

[] Continuation [] Divisional [] Continuation-in-part (CIP) of prior application No. / Prior application information: Examiner: Group/Art Unit: _

First application information. Examiner of CONTINUATION OR DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box Sb, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation again only to relief upon when a portion has been inadverently omitted from the submitted application and in the properties of the pro

19. CORRESPONDENCE ADDRESS

[X] Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here

| Name (Print/Type) | Thibault Fayette | Registration No | o. (Attorney/Agent) | Limited Recognition Under 37 CFR 10.9(b) |
|-------------------|------------------|-----------------|---------------------|---|
| Signature | Taul | | Date | August 15, 2001 |

Burden Hour Statement. This form is grant of the Deburs to complete. Time will vary depending upon the needs of the individual case. Pay comments on the amount of time you are required to complete this form shalled by en

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

\$1,266

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT

| | Complete if Known | | |
|----------------------|-------------------------|--|--|
| Application Number | | | |
| Confirmation Number | | | |
| Filing Date | August 15, 2001 | | |
| First Named Inventor | Nicola John Policicchio | | |
| Examiner Name | | | |
| Group/Art Unit | | | |
| Attorney Docket No | 8666 | | |

| METHOD OF PAYMENT (check one) | i | FEE CALCULATION (continue | d) |
|---|-------------|---|----------|
| The Commissioner is hereby authorized to charge indicated | i 3. ADDI | TIONAL FEES | |
| fees and credit any over payments to: | | | |
| | Code (\$ | | Fee Paid |
| Deposit Account Number 16-2480 | 105 130 | | 0 |
| Deposit Account Name The Procter & Gamble Company | 127 50 | | |
| Charge Any Additional Fee Required Under status See 37 CFR §127 | 139 130 | | 0 |
| 37 C FR 881 16 and 1 17 | 147 2,32 | | 0 |
| 43 | 112 92 | PRequesting publication of SIR prior to Examiner's action | |
| PH - | | | 0 |
| FEE CALCULATION | 113 1,844 | * Requesting publication of SIR after | |
| . 5 | | Examiner's action | 0 |
| BASIC FILING FEE - Large Entity | 115 110 | | 0 |
| if if | 116 390 | Extension for reply within 2nd month | 0 |
| Code (\$) Fee Description Fee Paid | 117 890 | Extension for reply within 3rd month | 0 |
| 1Q1 710 Utility filing fee \$710 | 118 1,39 | Extension for reply within 4th month | 0 |
| 106 320 Design filing fee [] | 128 1,89 | Extension for reply within 5th month | 0 |
| 107 490 Plant filing fee [] | 119 31 | Notice of Appeal | 0 |
| 168 710 Reissue filing fee [] | 120 31 | Filing a brief in support of an appeal | 0 |
| 14 150 Provisional filing fee [] | 121 27 | Request for oral hearing | [] |
| (2) | 138 1,51 | Petition to institute a public use proceeding | O |
| SUBTOTAL (1) \$710 | 140 11 | Petition to revive - unavoidable | [] |
| 2. EXTRA CLAIM FEES - Large Entity | 141 1,24 | | [] |
| | 142 1,24 | | 0 |
| Extra Below Fee | 143 44 | | 0 |
| Claims Fee Paid | 144 60 | | 0 |
| Total Claims [42] - 20** = [22] x [18] = \$39 | | | 0 |
| Independent Claims [5] - $3** = [3] \times [80] = 16 | | | 0 |
| Multiple Dependent [] = [] | 126 18 | | 0 |
| ** or number previously paid, if greater, For Reissues, see below | 146 71 | | |
| 6.1 (A) E B 1.1 | | (37 CFR § 1.129(a)) | [] |
| Code (\$) Fee Description | 149 71 | | |
| 103 18 Claims in excess of 20 102 80 Independent claims in excess of 3 | 179 71 | examined (37 CFR §1.129(b) | 0 |
| | | | 0 |
| 104 270 Multiple dependent claim, if not paid 109 80 **Reissue independent claims over original patent | 169 71 | Request for expedited examination of a design application | [] |
| 110 18 **Reissue claims in excess of 20 & over original patent | | or a design application | |
| 110 16 Reassure ciains in excess of 20 & over original paid | | (specify) | n |
| | | (specify) | 0 |
| | Other ree | (specify) | 0 |
| SUBTOTAL (2) \$5 | 56 * Reduce | d by Basic Filing Fee Paid SUBTOTAL(3) | (\$)[] |

| SUBMITTED BY | | | Complete (if applicable) | | |
|-------------------|---|---|--|------------------------------|-----------------|
| Name (Print/Type) | Thibault Fayette | Registration No. (Attorney/Agent) | Limited Recognition Under 37 CFR 10.9(b) | Telephone | (513) 626-2408 |
| Signature | WING Information of the beginning before public Credit Card | information should not be liscladed on this for | m. Provide credit card information in | Date d authorization on PTO- | August 15, 2001 |